

Jary Glenn Goodrich / 12-7071
Name and Prisoner/Booking Number

FILED

DEC 28 2012


Clerk

Minnehaha County Jail
Place of Confinement

500 North Minnesota Avenue
Mailing Address

Sioux Falls, South Dakota 57104
City, State, Zip Code

UNITED STATES DISTRICT COURT
DISTRICT OF SOUTH DAKOTA
SOUTHERN DIVISION

Jary Glenn Goodrich,
(Full Name of Plaintiff)

Case No. CIV 12 - 4216
(To be supplied by the Clerk)

Plaintiff,

vs.

LINCOLN COUNTY CIRCUIT COURT, S. Dak.,
STATE OF SOUTH DAKOTA,
S.D. DEPARTMENT OF CORRECTIONS,
_____,
(Full Name of Each Defendant)

CIVIL RIGHTS COMPLAINT
BY A PRISONER

Original Complaint
 First Amended Complaint
 Second Amended Complaint

Defendants.

INJUNCTIVE RELIEF OR JURY TRIAL DEMANDED

A. JURISDICTION

1. This Court has jurisdiction over this action pursuant to:
 - a. 28 U.S.C. § 1343(a)(3); 42 U.S.C. § 1983
 - b. 28 U.S.C. § 1331; *Bivens v. Six Unknown Federal Narcotics Agents*, 403 U.S. 388 (1971).
 - c. Other: (Please specify.) Parole Release
2. Name of Plaintiff: Jary Glenn Goodrich
Present mailing address: 500 North Minnesota Avenue, Sioux Falls, South Dakota 57104
(Failure to notify the Court of any change of address may result in dismissal of this action.)

Institution/city where violation occurred: Minnehaha County Jail / Sioux Falls, S.D.

3. Name of first Defendant: Lincoln Co. Circuit Ct., S.Dak.. The first Defendant is employed as:
at _____
(Position and Title) _____ (Institution) _____

This Defendant is sued in his/her: individual capacity official capacity (check one or both)
Explain how this Defendant was acting under color of law: _____

4. Name of second Defendant: State of South Dakota. The second Defendant is employed as:
at _____
(Position and Title) _____ (Institution) _____

This Defendant is sued in his/her: individual capacity official capacity (check one or both)
Explain how this Defendant was acting under color of law: _____

5. Name of third Defendant: S.D. Dept. of Corrections. The third Defendant is employed as:
at _____
(Position and Title) _____ (Institution) _____

This Defendant is sued in his/her: individual capacity official capacity (check one or both)
Explain how this Defendant was acting under color of law: _____

6. Name of fourth Defendant: _____. The fourth Defendant is employed as:
at _____
(Position and Title) _____ (Institution) _____

This Defendant is sued in his/her: individual capacity official capacity (check one or both)
Explain how this Defendant was acting under color of law: _____

(If you name more than four Defendants, answer the questions listed above for each additional Defendant on a separate page.)

B. PREVIOUS LAWSUITS

1. Have you filed any other lawsuits while you were a prisoner? Yes No
2. If your answer is "yes," how many lawsuits have you filed? _____. Describe the previous lawsuits in the spaces provided below.
3. First prior lawsuit:
 - a. Parties to previous lawsuit:
Plaintiff: _____
Defendants: _____

b. Court: (If federal court, identify the district; if state court, identify the county.) _____

c. Case or docket number: _____

d. Claims raised: _____

e. Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?)

f. Approximate date lawsuit was filed: _____

g. Approximate date of disposition: _____

4. Second prior lawsuit:

a. Parties to previous lawsuit:

Plaintiff: _____
Defendants: _____

b. Court: (If federal court, identify the district; if state court, identify the county.) _____

c. Case or docket number: _____

d. Claims raised: _____

e. Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?)

f. Approximate date lawsuit was filed: _____

g. Approximate date of disposition: _____

5. Third prior lawsuit:

a. Parties to previous lawsuit:

Plaintiff: _____
Defendants: _____

b. Court: (If federal court, identify the district; if state court, identify the county.) _____

c. Case or docket number: _____

d. Claims raised: _____

e. Disposition: (For example: Was the case dismissed? Was it appealed? Is it still pending?)

f. Approximate date lawsuit was filed: _____

g. Approximate date of disposition: _____

(If you filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.)

C. CAUSE OF ACTION

COUNT I

1. The following constitutional or other federal right has been violated by the Defendant(s): _____
Probation or Parole Release

2. Count I involves: (Check only one; if your claim involves more than one issue, each issued should be stated in a different count)

<input type="checkbox"/> Medical care	<input type="checkbox"/> Access to the court	<input type="checkbox"/> Mail
<input type="checkbox"/> Disciplinary proceedings	<input checked="" type="checkbox"/> Retaliation	<input type="checkbox"/> Exercise of religion
<input type="checkbox"/> Excessive force by an officer	<input type="checkbox"/> Threat to safety	<input checked="" type="checkbox"/> Other: <u>Parole Release</u>

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count I. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

The Lincoln County Circuit Court, S. Dak., has refused and retaliated against me because I will not give up any of my U.S. Constitutional Rights and had a Jury Trial. My alleged crime is Stalking a 2 year sentence. Probation or Parole Release in the "Establishment of Initial Parole Date" and "Minimum Time To Be Served" by S.D. Statute is 25% or 174 Day of Confinement. I have been in Minnehaha County Jail since May 10, 2012 or about 230 Days. My rights to parole release by S.D. Statute have been violated by the Lincoln County Court, S. Dak., or State of South Dakota or S.D. Dept. of Corrections.

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

My Right to be Released and Freedom have been violated. The wants to send me to Prison.

5. **Administrative Remedies:**

- Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? Yes No
- Did you submit a request for administrative relief on Count I? Yes No
- Did you appeal your request for relief on Count I to the highest level? Yes No
- If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not. I have not been sentenced by the Court. My sentence to be served is Done, IE, 174 Days in Co. Jail. Been here starting May 10, 2012 or about 230 Days of Confinement.

COUNT II

1. The following constitutional or other federal right has been violated by the Defendant(s): _____

2. Count II involves: (Check **only one**; if your claim involves more than one issue, each issued should be stated in a different count) Medical care Access to the court Mail
 Disciplinary proceedings Retaliation Exercise of religion Property
 Excessive force by an officer Threat to safety Other: _____

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count II. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

5. Administrative Remedies:

a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? Yes No

b. Did you submit a request for administrative relief on Count II? Yes No

c. Did you appeal your request for relief on Count II to the highest level? Yes No

d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not.

COUNT III

1. The following constitutional or other federal right has been violated by the Defendant(s):

2. Count III involves: (Check **only one**; if your claim involves more than one issue, each issued should be stated in a different count) Medical care Access to the court Mail
 Disciplinary proceedings Retaliation Exercise of religion Property
 Excessive force by an officer Threat to safety Other:

3. **Supporting Facts:** (State as briefly as possible the FACTS supporting Count III. Describe exactly what each Defendant did or did not do to violate your rights. State the facts clearly in your own words without citing legal authority or arguments).

4. **Injury:** (State how you have been injured by the actions or inactions of the Defendant(s)).

5. Administrative Remedies:

a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? Yes No

b. Did you submit a request for administrative relief on Count III? Yes No

c. Did you appeal your request for relief on Count III to the highest level? Yes No

d. If you did not submit or appeal a request for administrative relief to the highest level, briefly explain why you did not.

(If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.)

D. REQUEST FOR RELIEF

State briefly what you want the Court to do for you.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on December 26, 2012
DATE

Jary Glenn Goodrich
SIGNATURE OF PLAINTIFF

(Name and title or paralegal, legal assistant, or
other person who helped prepare this complaint)

(Signature of attorney, if any)

(Attorney's address & telephone number)

ADDITIONAL PAGES

All questions must be answered concisely in the proper space on the form. If needed, you may attach additional pages. The form, however, must be completely filled in to the extent applicable.